

Amendment Free via
Pay-300

Fill in this information to identify your case:

Debtor 1	Jessie	LaQuan Rashen	Sanders	
	First Name	Middle Name	Last Name	
Debtor 2	(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey				
Case number 25-12782 (If known)				

AMERICAN BANKRUPTCY COURTS

04/28/25 13:43:05

Check if this is an
amended filing

D. Chapman

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ 1,480,000.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ 140,659.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$ 1,620,659.00

Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ 926,478.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 44,612.39
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$ 0.00
	Your total liabilities
	\$ 971,090.39

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 28,800.00
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 16,140.00

Debtor 1 Jessie

LaQuan Rashen

Sanders

First Name

Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 36,000.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**Total claim**

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$ 18,012.39

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 26,600.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ 0.00

9d. Student loans. (Copy line 6f.) \$ 0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ 0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ 0.00

9g. **Total.** Add lines 9a through 9f. \$ 44,612.39

Fill in this information to identify your case and this filing:

Debtor 1	Jessie	LaQuan Rashen	Sanders
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey			
Case number	25-12782		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 93 Meredith rd

Street address, if available, or other description

Colonia NJ 07067

City State ZIP Code

Middlesex
County

If you own or have more than one, list here:

1.2.

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?
\$ 1,480,000.00 \$ 1,480,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Life Estate

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?
\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

1.3. Street address, if available, or other description

City _____ State _____ ZIP Code _____

County _____

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

\$ 1,480,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

3.1. Make: Merc Benz

Model: GLS450

Year: 2017

Approximate mileage: 184772

Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 11,359.00 \$ 11,359.00

Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: Ford

Model: Taurus

Year: 2015

Approximate mileage: 113587

Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 6,500.00 \$ 6,500.00

Check if this is community property (see instructions)

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

3.3. Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: _____	<input type="checkbox"/> Debtor 2 only		
Approximate mileage: _____	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information: _____ <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> At least one of the debtors and another		
3.4. Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: _____	<input type="checkbox"/> Debtor 2 only		
Approximate mileage: _____	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information: _____ <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> At least one of the debtors and another		
4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories			
<input type="checkbox"/> No <input type="checkbox"/> Yes			
4.1. Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: _____	<input type="checkbox"/> Debtor 2 only		
Other information: _____ <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions) \$ _____ \$ _____			
If you own or have more than one, list here:			
4.2. Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: _____	<input type="checkbox"/> Debtor 2 only		
Other information: _____ <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions) \$ _____ \$ _____			

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here →

\$ 17,859.00

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

Yes. Describe.....

Double Oven, 2 Refrigerators, Dish Washer, Washer & Dryer

\$ 2,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

6 Televisions, Sonos audio, Computers

\$ 3,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

\$

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

\$

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

\$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

clothes, shoes, coats

\$ 1,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

watches

\$ 50,000.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →

\$ 56,500.00

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No
 Yes..... Cash: \$ 100.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No
 Yes..... Institution name:

17.1. Checking account:	<u>Navy Federal</u>	\$ 1,500.00
17.2. Checking account:	_____	\$ _____
17.3. Savings account:	<u>Navy Federal</u>	\$ 1,200.00
17.4. Savings account:	_____	\$ _____
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	_____	\$ _____
17.7. Other financial account:	_____	\$ _____
17.8. Other financial account:	_____	\$ _____
17.9. Other financial account:	_____	\$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No
 Yes..... Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

<input type="checkbox"/> No	Name of entity:	% of ownership:
<input checked="" type="checkbox"/> Yes. Give specific information about them.....	<u>Sanders & Son's Construction LLC</u>	50% % \$ 50,000.00
	_____	0% % \$ _____
	_____	0% % \$ _____

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them.....

Issuer name:

\$ _____
\$ _____
\$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:	\$ _____
Pension plan:	\$ _____
IRA:	\$ _____
Retirement account:	\$ _____
Keogh:	\$ _____
Additional account:	\$ _____
Additional account:	\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

Electric:	\$ _____
Gas:	\$ _____
Heating oil:	\$ _____
Security deposit on rental unit:	\$ _____
Prepaid rent:	\$ _____
Telephone:	\$ _____
Water:	\$ _____
Rented furniture:	\$ _____
Other:	\$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

\$ _____
\$ _____
\$ _____

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No
 Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\$ _____
\$ _____
\$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No
 Yes. Give specific information about them....

\$ _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No
 Yes. Give specific information about them....

\$ _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No
 Yes. Give specific information about them....

\$ _____

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$ _____
State: \$ _____
Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No
 Yes. Give specific information.....

Alimony: \$ _____
Maintenance: \$ _____
Support: \$ _____
Divorce settlement: \$ _____
Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information.....

\$ _____

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company Company name: _____
of each policy and list its value. ...

Beneficiary: _____

Surrender or refund value: _____

\$ _____

\$ _____

\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information. _____

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim. _____

\$ _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim. _____

\$ _____

35. Any financial assets you did not already list

No

Yes. Give specific information. _____

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 52,800.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No

Yes. Describe.....

Contract doing apartment Renovation - We get Paid 30 days after completion.

\$ 8,500.00

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe.....

office furniture

\$ 1,000.00

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe..... Tools equipment \$ 4,000.00

41. Inventory

No
 Yes. Describe..... \$

42. Interests in partnerships or joint ventures

No
 Yes. Describe..... Name of entity: % of ownership:
 _____ % \$ _____
 _____ % \$ _____
 _____ % \$ _____

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe..... \$

44. Any business-related property you did not already list

No
 Yes. Give specific information \$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$ 13,500.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
 Yes..... \$

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

48. Crops—either growing or harvested

No
 Yes. Give specific information.....

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes.....

\$ _____

50. Farm and fishing supplies, chemicals, and feed

No
 Yes.....

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information.....

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here



\$ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

\$ _____
\$ _____
\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here



\$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → \$ 1,480,000.00

56. Part 2: Total vehicles, line 5 \$ 17,859.00

57. Part 3: Total personal and household items, line 15 \$ 56,500.00

58. Part 4: Total financial assets, line 36 \$ 52,800.00

59. Part 5: Total business-related property, line 45 \$ 13,500.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. \$ 140,659.00 Copy personal property total → + \$ 140,659.00

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$ 1,620,659.00

Fill in this information to identify your case:		
Debtor 1	Jessie	LaQuan Rashen
	First Name	Middle Name
Sanders		Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number (If known)	25-12782	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : _____			

3. Are you claiming a homestead exemption of more than \$214,000?

(Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:		
Debtor 1	Jessie	LaQuan Rashen
	First Name	Middle Name
	Sanders	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: District of New Jersey		
Case number (if known)	25-12782	

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	South Carolina FCU	Describe the property that secures the claim: Creditor's Name 1 Corporate Drive Number Street Lake Zurich IL 60047 City State ZIP Code	Single Family Dwelling	\$ 880,000.00 \$ 1,480,000.00 \$
		As of the date you file, the claim is: Check all that apply.		
		<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		Nature of lien. Check all that apply.		
		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
	Date debt was incurred 01/08/2023	Last 4 digits of account number 9 8 4 2		
2.2	Ally Financial	Describe the property that secures the claim: Creditor's Name 500 Woodward Ave Number Street MI-01-13-Autofin Detroit MI 48226 City State ZIP Code	2017 Mercedes Benz GS450	\$ 38,486.00 \$ 11,358.00 \$
		As of the date you file, the claim is: Check all that apply.		
		<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		Nature of lien. Check all that apply.		
		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
	Date debt was incurred 03/08/2021	Last 4 digits of account number 5 0 8 2		
	Add the dollar value of your entries in Column A on this page. Write that number here: \$ 926,478.00			

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Additional Page

Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

2.3 Exeter Finance Describe the property that secures the claim: \$ 7,992.00 \$ 6,500.00 \$ _____

Creditor's Name
PO Box 650598
Number Street

2015 Ford Taurus (Repossessed)

Dallas TX 75265
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred 06/25/2021

Last 4 digits of account number 1 9 4 4

Creditor's Name

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Creditor's Name

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$ _____

Fill in this information to identify your case:

Debtor 1	Jessie	LaQuan Rashen	Sanders
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey			
Case number (If known)			25-12782

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	NJ Family Support Center Priority Creditor's Name PO Box 4880 Number Street	Last 4 digits of account number	7 3 2 7	\$ 18,012.39 \$ 18,012.39 \$	
		When was the debt incurred?	01/05/2023		
		As of the date you file, the claim is: Check all that apply.			
		<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
2.2	Internal Revenue Services Priority Creditor's Name PO Box 931000 Number Street	Last 4 digits of account number	3 8 5 7	\$ 168,115.29 \$ 25,000.00 \$	
		When was the debt incurred?	12/31/2022		
		As of the date you file, the claim is: Check all that apply.			
		<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 1B Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

		Total claim	Priority amount	Nonpriority amount
2.1	State Of New Jersey - Division of Tax Priority Creditor's Name PO Box 643 Number Street Revenue Processing Center -Payme	Last 4 digits of account number 3 8 5 7	\$ 15,897.00	\$ 1,600.00 \$
	Trenton NJ 08646 City State ZIP Code	When was the debt incurred? 12/31/2022		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Is the claim subject to offset?	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
	Priority Creditor's Name Number Street City State ZIP Code	Last 4 digits of account number _____	\$ _____	\$ _____ \$ _____
	Who incurred the debt? Check one.	When was the debt incurred? _____		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply.		
	Is the claim subject to offset?	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
	Priority Creditor's Name Number Street City State ZIP Code	Last 4 digits of account number _____	\$ _____	\$ _____ \$ _____
	Who incurred the debt? Check one.	When was the debt incurred? _____		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply.		
	Is the claim subject to offset?	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**4.1 Apple Credit Card - Goldman Sachs bank**

Nonpriority Creditor's Name

PO Box 7247 - Lockbox 6112

Number Street

Philadelphia PA 19170

City State ZIP Code

Last 4 digits of account number 0 0 8 1

\$ 132.00

When was the debt incurred? 03/18/2025

Total claim

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card

4.2 Mercury Card

Nonpriority Creditor's Name

PO Box 84064

Number Street

Columbus GA 31908

City State ZIP Code

Last 4 digits of account number 1 0 0 1

\$ 591.00

When was the debt incurred? 03/18/2025

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card

4.3 Navy Federal FCU

Nonpriority Creditor's Name

820 Follin Lane

Number Street

Vienna VA 22180

City State ZIP Code

Last 4 digits of account number 9 6 1 5

\$ 1,833.00

When was the debt incurred? 03/18/2025

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

Total claim

Total claims from Part 1	6a. Domestic support obligations	6a. \$ 18,012.39
	6b. Taxes and certain other debts you owe the government	6b. \$ 26,600.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ 0.00

6e. Total. Add lines 6a through 6d.

6e. \$ 44,612.39

Total claim

Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 0.00
	6j. Total. Add lines 6f through 6i.	6j. \$ 0.00

Fill in this information to identify your case:		
Debtor	Jessie	LaQuan Rashen
	First Name	Middle Name
		Last Name
Debtor 2 (Spouse if filing)		
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number (If known)	25-12782	

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name _____

Number Street _____

City State ZIP Code _____

2.2

Name _____

Number Street _____

City State ZIP Code _____

2.3

Name _____

Number Street _____

City State ZIP Code _____

2.4

Name _____

Number Street _____

City State ZIP Code _____

2.5

Name _____

Number Street _____

City State ZIP Code _____

Fill in this information to identify your case:

Debtor 1	JESSIE	LAQUAN RASHEN	SANDERS
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey			
Case number (If known)	25-12782		

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Employed
 Not employed

Debtor 2 or non-filing spouse

Employed
 Not employed

Occupation

SELF EMPLOYED

Employer's name

93 MEREDITH RD

Employer's address

Number Street

COLONIA NJ 07067

City State ZIP Code

Number Street

City State ZIP Code

How long employed there? 20

20

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or
non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 36,000.00

\$ _____

3. Estimate and list monthly overtime pay.

3. + \$ _____

+ \$ _____

4. Calculate gross income. Add line 2 + line 3.

4. \$ 36,000.00

\$ _____

Debtor 1 JESSIE LAQUAN RASHEN SANDERS

Case number (if known) 25-12782

For Debtor 1

For Debtor 2 or
non-filing spouse

Copy line 4 here..... ➔ 4. \$ 36,000.00 \$ _____

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions	5a. \$ 7,200.00	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____
5e. Insurance	5e. \$ _____	\$ _____
5f. Domestic support obligations	5f. \$ _____	\$ _____
5g. Union dues	5g. \$ _____	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ _____ \$ _____

7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 28,800.00 \$ _____

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ _____ \$ _____

8b. Interest and dividends

8b. \$ _____ \$ _____

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ _____ \$ _____

8d. Unemployment compensation

8d. \$ _____ \$ _____

8e. Social Security

8e. \$ _____ \$ _____

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____ 8f. \$ _____ \$ _____

8g. Pension or retirement income

8g. \$ _____ \$ _____

8h. Other monthly income. Specify: _____

8h. + \$ _____ + \$ _____

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ 0.00 \$ _____

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 28,800.00 + \$ _____ = \$ 28,800.00

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____ 11. + \$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies

12.

\$ 28,800.00

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Spring Summer Business Increase 25%

Fill in this information to identify your case:			
Debtor 1	Jessie LaQuan Rashen Sanders		
First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey			
Case number (if known)	25-12782		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

ISAIAH SANDERS

Dependent's age

11

Does dependent live with you?

No

Yes

Do not state the dependents' names.

JESSI SANDERS

15

No

Yes

JOI SANDERS

15

No

Yes

AVA THURMAN

12

No

Yes

KAJ SANDERS

19

No

Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 7,743.00

If not included in line 4:

4a. Real estate taxes

4a. \$

4b. Property, homeowner's, or renter's insurance

4b. \$

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 1,000.00

4d. Homeowner's association or condominium dues

4d. \$

Debtor 1 Jessie LaQuan Rashen Sanders
 First Name Middle Name Last Name

Case number (if known) 25-12782

Your expenses	
5. Additional mortgage payments for your residence, such as home equity loans	5. \$ _____
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 750.00
6b. Water, sewer, garbage collection	6b. \$ 200.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 250.00
6d. Other. Specify: _____	6d. \$ _____
7. Food and housekeeping supplies	
7. \$ 750.00	7. \$ _____
8. Childcare and children's education costs	
8. \$ 800.00	8. \$ _____
9. Clothing, laundry, and dry cleaning	
9. \$ 100.00	9. \$ _____
10. Personal care products and services	
10. \$ 100.00	10. \$ _____
11. Medical and dental expenses	
11. \$ 250.00	11. \$ _____
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	
12. \$ 500.00	12. \$ _____
13. Entertainment, clubs, recreation, newspapers, magazines, and books	
13. \$ 100.00	13. \$ _____
14. Charitable contributions and religious donations	
14. \$ 100.00	14. \$ _____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 190.00
15b. Health insurance	15b. \$ 150.00
15c. Vehicle insurance	15c. \$ 350.00
15d. Other insurance. Specify: _____	15d. \$ _____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	
16. \$ _____	16. \$ _____
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 807.00
17b. Car payments for Vehicle 2	17b. \$ _____
17c. Other. Specify: _____	17c. \$ _____
17d. Other. Specify: _____	17d. \$ _____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	
18. \$ _____	18. \$ _____
19. Other payments you make to support others who do not live with you. Specify: Child Support	
19. \$ 800.00	19. \$ _____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ _____
20b. Real estate taxes	20b. \$ _____
20c. Property, homeowner's, or renter's insurance	20c. \$ _____
20d. Maintenance, repair, and upkeep expenses	20d. \$ _____
20e. Homeowner's association or condominium dues	20e. \$ _____

Debtor 1 **Jessie LaQuan Rashen Sanders**
First Name Middle Name Last Name

Case number (if known) 25-12782

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 16,140.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 16,140.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 28,800.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 16,140.00

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ 12,660.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here: decrease in Mortgage working on modification

Fill in this information to identify your case:		
Debtor 1	Jessie	LaQuan Rashen
	First Name	Middle Name
	Sanders	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number (if known)	25-12782	

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/25

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

9.00

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items:

Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 4099

7. Out-of-pocket health care allowance:

Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 84.00

7b. Number of people who are under 65 X 9

7c. Subtotal. Multiply line 7a by line 7b.

\$ 756.00 Copy here → \$ 756.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$

7e. Number of people who are 65 or older X

7f. Subtotal. Multiply line 7d by line 7e.

\$ Copy here → + \$

7g. Total. Add lines 7c and 7f. \$ 756.00 Copy here → \$ 756.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 822.00

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 3,000.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
South Carolina Federal Credit Union	\$ 7,743.66
	\$ _____
	+ \$ _____
9b. Total average monthly payment	\$ 7,743.66 Copy here → - \$ 7,743.66 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0. \$ 4,743.66 Copy here → \$ 4,743.66

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$

Explain why: _____

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ 401.00

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: Mercedes Benz GS450

13a. Ownership or leasing costs using IRS Local Standard \$ 662.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
Ally Financial	\$ 779.13
+ \$	
Total average monthly payment	\$ 779.13

Copy here ➔ — \$ 779.13 Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense
Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. \$ 117.13

Copy net Vehicle 1 expense here ➔ \$ 117.13

Vehicle 2 Describe Vehicle 2: _____

13d. Ownership or leasing costs using IRS Local Standard \$ _____

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
	\$ 0.00
+ \$	
Total average monthly payment	\$ _____

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense
Subtract line 13e from 13d. If this number is less than \$0, enter \$0. \$ _____

Copy net Vehicle 2 expense here ➔ \$ _____

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation. \$ _____

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. \$ _____

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

First Name	Middle Name	Last Name
Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. \$ <u>10,000.00</u> Do not include real estate, sales, or use taxes.		
17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$ <u> </u> Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.		
18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. \$ <u>450.00</u> Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.		
19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ <u>800.00</u> Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.		
20. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ <u> </u>		
21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$ <u> </u> Do not include payments for any elementary or secondary school education.		
22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$ <u>150.00</u> Payments for health insurance or health savings accounts should be listed only in line 25.		
23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$ <u>200.00</u> Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 122C-1, or any amount you previously deducted.		
24. Add all of the expenses allowed under the IRS expense allowances. \$ <u>22,539.00</u> Add lines 6 through 23.		
Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.		
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance \$ <u>500.00</u> Disability insurance \$ <u> </u> Health savings account + \$ <u> </u> Total \$ <u>500.00</u> Copy total here ➔ \$ <u>500.00</u>		
Do you actually spend this total amount? <input type="checkbox"/> No. How much do you actually spend? \$ <u> </u> <input checked="" type="checkbox"/> Yes		
26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$ <u>0.00</u> 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. \$ <u>0.00</u> By law, the court must keep the nature of these expenses confidential.		

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. \$ _____ 0.00

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$214.58* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. \$ _____ 0.00

* Subject to adjustment on 4/01/28, and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. \$ _____ 0.00

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). + \$ _____ 100.00

Do not include any amount more than 15% of your gross monthly income.

32. **Add all of the additional expense deductions.** Add lines 25 through 31. \$ _____ 600.00

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment

Mortgages on your home

33a. Copy line 9b here. → \$ 7,743.66

Loans on your first two vehicles

33b. Copy line 13b here. → \$ 779.13

33c. Copy line 13e here. → \$ 0.00

33d. List other secured debts:

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

No

\$ _____

Yes

\$ _____

No

+ \$ _____

Yes

33e. Total average monthly payment. Add lines 33a through 33d. → \$ 8,522.79

Copy total here →

\$ 8,522.79

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.
 Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
South Carolina FCU	Primary Resid.	\$ 248,000.00 + 60 =	\$ 4,133.33
_____	_____	\$ _____ + 60 =	\$ _____
_____	_____	\$ _____ + 60 =	\$ _____
		Total	\$ 4,133.33
			Copy total here ➔
			\$ 4,133.33

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. \$ 26,691.34 + 60 \$ 444.86

36. Projected monthly Chapter 13 plan payment \$ 4,578.19

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense

x 7.8%

\$ 357.10

\$ 357.10

\$ 13,458.08

37. Add all of the deductions for debt payment. Add lines 33e through 36.

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances. \$ 22,539.00

Copy line 32, All of the additional expense deductions. \$ 600.00

Copy line 37, All of the deductions for debt payment. + \$ 13,458.08

Total deductions. \$ 36,597.08

Copy total here ➔

\$ 36,597.08

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 2:

Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. Copy your total current monthly income from line 14 of Form 122C-1, *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* \$ 36,000.00

40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ 0.00

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ 0.00

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here → \$ 36,597.08

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
Insurance Liability Workman Comp	\$ 3,500.00
Equipment Rental	\$ 4,500.00
	+ \$
Total	\$ 8,000.00

Copy here → + \$ 8,000.00

44. Total adjustments. Add lines 40 through 43. → \$ 44,597.08 Copy here → - \$ 44,597.08

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

\$ 8,597.08

Part 3: Change in Income or Expenses

46. Change in Income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input checked="" type="checkbox"/> 122C-1 <input type="checkbox"/> 122C-2	14	Cold Season / Holiday	11/01/2025	<input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	\$ 11,000.00
<input type="checkbox"/> 122C-1 <input checked="" type="checkbox"/> 122C-2	43	Outside Work None	11/01/2025	<input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	\$ 3,500.00
<input type="checkbox"/> 122C-1 <input type="checkbox"/> 122C-2	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ —
<input type="checkbox"/> 122C-1 <input type="checkbox"/> 122C-2	—	—	—	<input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$ —

Debtor 1 Jessie LaQuan Rashen Sanders

Case number (if known) 25-12782

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.


Signature of Debtor 1
Date 4/27/25
MM / DD / YYYY


Signature of Debtor 2
Date _____
MM / DD / YYYY

Fill in this Information to identify your case:

Debtor 1	Jessie	LaQuan Rashen	Sanders
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of New Jersey			
Case number (if known) 25-12782			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.


X _____
Signature of Debtor 1

X _____
Signature of Debtor 2

Date 4/27/25
MM / DD / YYYY

Date _____
MM / DD / YYYY

Fill in this information to identify your case:		
Debtor 1	Jessie	LaQuan Rashen
	First Name	Middle Name
Debtor 2	Sanders	Last Name
(Spouse, if filing)		
United States Bankruptcy Court for the: District of New Jersey		
Case number (If known)	25-12782	

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1 Debtor 2:
lived there

Dates Debtor 2
lived there

Same as Debtor 1

Same as Debtor 1

Number Street

From _____
To _____

Number Street

From _____
To _____

City State ZIP Code

City State ZIP Code

Same as Debtor 1

Same as Debtor 1

Number Street

From _____
To _____

Number Street

From _____
To _____

City State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

From January 1 of current year until the date you filed for bankruptcy:

Debtor 1	Debtor 2
Sources of income Check all that apply.	Sources of income Check all that apply.
Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)

<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ 114,121.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
<input checked="" type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	

For last calendar year:

(January 1 to December 31, 2024) YYYY

<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ 120,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
<input checked="" type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	

For the calendar year before that:

(January 1 to December 31, 2023) YYYY

<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ 85,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
<input checked="" type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1	Debtor 2
Sources of income Describe below.	Sources of income Describe below.
Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)

From January 1 of current year until the date you filed for bankruptcy:

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

For last calendar year:

(January 1 to December 31, 2024) YYYY

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

For the calendar year before that:

(January 1 to December 31, 2023) YYYY

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Mercury Card Creditor's Name	05/08/2025	\$ 1,500.00	\$ 591.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
PO Box 84064 Number Street	04/12/2025			
	03/15/2025			
Columbus GA 31908 City State ZIP Code				
Apple Credit Card Creditor's Name	01/29/2025	\$ 1,959.09	\$ 132.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
PO Box 7247 Number Street	02/18/2025			
Lockbox 6112				
Philadelphia PA 19170 City State ZIP Code				
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				

Debtor 1 Jessie LaQuan Rasheden Sanders Case number (if known) 25-12782

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Kewana Demerest Insider's Name	01/03/2025	\$ 5,500.00	\$ 18,012.33	Child Support
Number Street	12/05/2024			
	11/10/2024			
Linden City	NJ State ZIP Code			
Kaj Sanders Insider's Name	04/15/2025	\$ 37,500.00	\$ 0.00	Pay Out from a Job Partner
93 Meredith Rd Number Street	03/15/2025			
Colonia City	NJ 07067 State ZIP Code			

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City	State ZIP Code			
Insider's Name		\$	\$	
Number Street				
City	State ZIP Code			

Debtor 1 Jessie LaQuan Rashen Sanders Case number (if known) 25-12782

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title _____	Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	Number Street _____ City _____ State _____ ZIP Code _____	
Case title _____	Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	Number Street _____ City _____ State _____ ZIP Code _____	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Describe the property	Date	Value of the property
2015 Ford Taurus Exeter Finance Creditor's Name _____	2015 Ford Taurus I WAS A U-signer 02/20/2005	\$ 6,500.00
PO Box 650598 Number Street _____	Explain what happened	
Dallas TX 75265 City _____ State _____ ZIP Code _____	<input checked="" type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
Describe the property	Date	Value of the property
Creditor's Name _____		\$ _____
Number Street _____	Explain what happened	
City _____ State _____ ZIP Code _____	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	

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11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			
Number Street		\$	
City		State	ZIP Code
Last 4 digits of account number: XXXX-_____			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		\$ _____	_____

Number	Street	
City	State	ZIP Code
Person's relationship to you		

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		\$ _____	
_____		\$ _____	
Number	Street		
City	State	ZIP Code	
Person's relationship to you _____			

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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Vision of God Worship	Church	12/08/2024	\$ 300.00
Charity's Name		01/12/2025	\$ 300.00
350 Leland Ave			
Number Street			
Plainfield NJ 0706:			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment made
Number Street			\$ _____
			\$ _____
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

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Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number	Street			\$ _____
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, if Not You				

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number	Street			\$ _____
City	State	ZIP Code		

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number	Street		
City	State	ZIP Code	
Person's relationship to you _____			
Person Who Received Transfer			
Number	Street		
City	State	ZIP Code	
Person's relationship to you _____			

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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Description and value of the property transferred		Date transfer was made
Name of trust _____		

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Number Street	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
City State ZIP Code				
Name of Financial Institution	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Number Street				
City State ZIP Code				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Number Street	Name _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
City State ZIP Code			

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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name

No

Yes

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

\$ _____

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City State ZIP Code

City State ZIP Code

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25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
City	State ZIP Code	
City	State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		
Court Name		<input type="checkbox"/> Pending
Number Street		<input type="checkbox"/> On appeal
Case number	City State ZIP Code	<input type="checkbox"/> Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Sanders & Son's Construction Business Name 253 Main St Number Street	Describe the nature of the business Construction Company	Employer Identification number Do not include Social Security number or ITIN. EIN: 8 4 2 1 4 5 4 5 2
Matawan NJ 07747 City State ZIP Code	Name of accountant or bookkeeper John Brown	Dates business existed From 06/19/2019 To
1K Sports LLC Business Name 93 Meredith Rd Number Street	Describe the nature of the business Sports Manament Company	Employer Identification number Do not include Social Security number or ITIN. EIN: 9 9 1 1 6 9 4 5 5
Meredith NJ 07067 City State ZIP Code	Name of accountant or bookkeeper	Dates business existed From 02/06/2024 To

Debtor 1	Jessie	LaQuan Rashen	Sanders	Case number (if known) <u>25-12782</u>
	First Name	Middle Name	Last Name	
Describe the nature of the business				Employer Identification number Do not include Social Security number or ITIN.
Business Name				EIN: _____
Number Street		Name of accountant or bookkeeper		Dates business existed
City _____ State _____ ZIP Code _____				From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Date issued

Name _____ MM / DD / YYYY
Number Street
City _____ State _____ ZIP Code _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.


Signature of Debtor 1

Date 4/27/25


Signature of Debtor 2

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).